PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with approable fee(s), to: Mail

Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	7590 09/11. ELLECTUAL PR RTHOUSE ROAD	OPERTY LAW C		Cer	tificate of Mailing or Trai	
VIENNA, VA 22	2182-3817		1	(Depositor's name)		
						(Signature)
			ľ			(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/672,304	09/29/2000		Neelakantan Sundare	san	AM9-99-0146	2605
TITLE OF INVENTION	: METHOD AND SYST	TEM FOR SELECTIVEL	Y ACCESSING FILES	ACCESSIBLE THRO	OUGH A NETWORK	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	12/11/2009
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
WONG,	LESLIE	2164	707-104100		*	
"Fee Address" indi PTO/SB/47; Rev 03-0 Number is required. ASSIGNEE NAME A PLEASE NOTE: Unl recordation as set fort! (A) NAME OF ASSIG	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE TIONAL BUSINES	"Indication form ned. Use of a Customer A TO BE PRINTED ON iffed below, no assignce pletion of this form is NO	THE PATENT (print of the data will appear on the data	r type) re patent. If an assign an assignment. ITY and STATE OR (cee is identified below, the COUNTRY) Armonk, Ne	
Please check the appropri	iate assignee category or	categories (will not be p	rinted on the patent):	☐ Individual 전 C	orporation or other private g	group entity Government
a. The following fee(s):	lo small entity discount p	permitted)	A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-0441 (enclose an extra copy of this form).			
Issue Fee			overpayment, to L	cposit Account Numb	er_09=0441_(chelese	an extra copy of this form).
Issue Fee ☐ Publication Fee (N☐ Advance Order - #	tus (from status indicate	· · · · · · · · · · · · · · · · · · ·				an extra copy of this form).
☐ Advance Order - # Change in Entity State a. Applicant claim NOTE: The Issue Fee an	tus (from status indicated s SMALL ENTITY stated d Publication Fee (if req	us. See 37 CFR 1.27. uired) will not be accepte	☐ b. Applicant is no	longer claiming SMA	LL ENTITY status. See 37	an extra copy of this form).
Advance Order - # Change in Entity Sta a. Applicant claim NOTE: The Issue Fee an interest as shown by the interest as	tus (from status indicated s SMALL ENTITY stated d Publication Fee (if req records of the United Sta	us. See 37 CFR 1.27.	☐ b. Applicant is no	longer claiming SMA an the applicant; a reg	LL ENTITY status. See 37 istered attorney or agent; or December 11,	CFR 1.27(g)(2). the assignee or other party in
☐ Advance Order - # Change in Entity State a. Applicant claim NOTE: The Issue Fee an	tus (from status indicates a SMALL ENTITY statud Publication Fee (if requested of the United States)	us. See 37 CFR 1.27. uired) will not be accepte	b. Applicant is no ed from anyone other the k Office.	longer claiming SMA an the applicant; a reg	LL ENTITY status. See 37	CFR 1.27(g)(2). the assignee or other party in